

| 1. Incident Name Lindsey Lake Tanker Spill - I-84, MP 54 | | 2. Operational Period (Date/Time) From: 16 Feb 2019 / 0700 To: 17 Feb 2019 / 0700 | | Assignment List ICS 204-CG | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 3. Branch | | 4. Division/Group/Staging A – On-Water Operations | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5. Operations Personnel <table style="width: 100%; border: none;"> <tr> <td style="width: 35%; text-align: right;">Name</td> <td style="width: 35%; text-align: right;">Affiliation</td> <td style="width: 30%; text-align: right;">Contact # (s)</td> </tr> <tr> <td colspan="3">Operations Section Chief: <u>Shiloh McConnell</u></td> </tr> <tr> <td colspan="3">Branch Director: _____</td> </tr> <tr> <td colspan="3">Division/Group Supervisor/STAM: <u>Seth Williams - On-Water Operations Group</u></td> </tr> </table> | | | | | | Name | Affiliation | Contact # (s) | Operations Section Chief: <u>Shiloh McConnell</u> | | | Branch Director: _____ | | | Division/Group Supervisor/STAM: <u>Seth Williams - On-Water Operations Group</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name | Affiliation | Contact # (s) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Operations Section Chief: <u>Shiloh McConnell</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Branch Director: _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Division/Group Supervisor/STAM: <u>Seth Williams - On-Water Operations Group</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6. Resources Assigned <div style="text-align: right; font-size: small;">"X" indicates 204a attachment with additional instructions</div> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">Strike Team/Task Force/Resource Identifier</th> <th style="width: 15%;">Leader</th> <th style="width: 15%;">Contact Info. #</th> <th style="width: 10%;"># Of Persons</th> <th style="width: 35%;">Reporting Info/Notes/Remarks</th> <th style="width: 5%;"></th> </tr> </thead> <tbody> <tr> <td>Four Technicians</td> <td>Alex</td> <td></td> <td>4</td> <td>ODOT Weigh Station / UPRR Access Gate</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td style="text-align: center;"><input type="checkbox"/></td></tr> </tbody> </table> | | | | | | Strike Team/Task Force/Resource Identifier | Leader | Contact Info. # | # Of Persons | Reporting Info/Notes/Remarks | | Four Technicians | Alex | | 4 | ODOT Weigh Station / UPRR Access Gate | <input type="checkbox"/> | | | | | | <input type="checkbox"/> | | | | | | <input type="checkbox"/> | | | | | | <input type="checkbox"/> | | | | | | <input type="checkbox"/> | | | | | | <input type="checkbox"/> | | | | | | <input type="checkbox"/> | | | | | | <input type="checkbox"/> | | | | | | <input type="checkbox"/> | | | | | | <input type="checkbox"/> | | | | | | <input type="checkbox"/> | | | | | | <input type="checkbox"/> |
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| 7. Work Assignments Check and maintain hard boom in place and deploy more boom if needed. Check and replace soft boom as needed. Provide boat transportation as needed to resource trustee representatives (NOAA/USFWS/ODFW) and air monitoring crews. Assist Land Operations Group as needed with flushing and recovery operations. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 8. Special Instructions PFDs to be worn at all times while on or near water. Crews should be aware of very low water temperatures. Employ buddy system while on or near the water. Immediately report any sighting of dead or injured fish or wildlife to supervisor. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 9. Communications (radio and/or phone contact numbers needed for this assignment) <table style="width: 100%; border: none;"> <tr> <th style="width: 35%; text-align: left;">Name/Function</th> <th style="width: 20%; text-align: left;">Radio: Freq./System/Channel</th> <th style="width: 15%; text-align: left;">Phone</th> <th style="width: 15%; text-align: left;">Cell/Pager</th> <th style="width: 15%;"></th> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table> Emergency Communications Medical 911 _____ Evacuation _____ Other _____ | | | | | | Name/Function | Radio: Freq./System/Channel | Phone | Cell/Pager | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name/Function | Radio: Freq./System/Channel | Phone | Cell/Pager | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 10. Prepared by: John Berger | | Date/Time 15 Feb 2019 / 1500 | | 11. Reviewed by (PSC): John Berger | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Date/Time 15 Feb 2019 / 1500 | | 12. Reviewed by (OSC): Shiloh McConnell | | Date/Time 15 Feb 2019 / 1500 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

ASSIGNMENT LIST (ICS 204-CG)

Purpose. The Assignment List(s) informs Division and Group supervisors of incident assignments. Once the Unified Command and General Staff agree to the assignments, the assignment information is given to the appropriate Divisions and Groups.

Preparation. The Assignment List is normally prepared by the Resources Unit, using guidance from the Incident Objectives (ICS 202-CG), Operational Planning Worksheet (ICS 215-CG), and the Operations Section Chief. The Assignment List must be approved by the Planning Section Chief and Operations Section Chief. When approved, it is included as part of the Incident Action Plan (IAP). Specific instructions for specific resources may be entered on an ICS 204a-CG for dissemination to the field. A separate sheet is used for each Division or Group. The identification letter of the Division is entered in the form title. Also enter the number (roman numeral) assigned to the Branch.

Special Note. The Assignment List, ICS 204-CG submits assignments at the level of Divisions and Groups. The Assignment List Attachment, ICS 204a-CG shows more specific assignment information, if needed. The need for an ICS 204a-CG is determined by the Planning and Operations Section Chiefs during the Operational Planning Worksheet (ICS 215-CG) development.

Distribution. The Assignment List is duplicated and attached to the Incident Objectives and given to all recipients of the Incident Action Plan. In some cases, assignments may be communicated via radio/telephone/fax. All completed original forms MUST be given to the Documentation Unit.

| <u>Item #</u> | <u>Item Title</u> | <u>Instructions</u> |
|---------------|------------------------------|--|
| 1. | Incident Name | Enter the name assigned to the incident. |
| 2. | Operational Period | Enter the time interval for which the form applies. |
| 3. | Branch | Enter the Branch designator. |
| 4. | Division/Group/Staging | Enter the Division/Group/Staging designator. |
| 5. | Operations Personnel | Enter the name of the Operations Chief, applicable Branch Director, and Division Supervisor. |
| 6. | Resources Assigned | Each line in this field may have a separate Assignment List Attachment (ICS 204a-CG). Enter the following information about the resources assigned to Division or Group for this period: |
| | Identifier | List identifier |
| | Leader | Leader name |
| | Contact Information | Primary means of contacting this person (e.g., radio, phone, pager, etc.). Be sure to include area code when listing a phone number. |
| | # Of Persons | Total number of personnel for the strike team, task force, or single resource assigned. |
| | Reporting Info/Notes/Remarks | Special notes or directions, specific to this strike team, task force, or single resource. Enter an "X" check if an Assignment List Attachment (ICS 204a-CG) will be prepared and attached. The Planning and Operations Section Chiefs determine the need for an ICS 204a-CG during the Operational Planning Worksheet (ICS 215-CG) development. |
| 7. | Work Assignment | Provide a statement of the tactical objectives to be achieved within the operational period by personnel assigned to this Division or Group. |
| 8. | Special Instructions | Enter a statement noting any safety problems, specific precautions to be exercised, or other important information. |
| 9. | Communications | Enter specific communications information (including emergency numbers) for this division /group. If radios are being used, enter function (command, tactical, support, etc.), frequency, system, and channel from the Incident Radio Communications Plan (ICS 205-CG). Note: Phone numbers should include area code. |
| 10. | Prepared By | Enter the name of the person completing the form, normally the Resources Unit Leader. |
| | Date/Time | Enter date (month, day, year) and time prepared (24-hour clock). |
| 11. | Reviewed by (PSC) | Enter date (month, day, year) and time prepared (24-hour clock). |
| | Date/Time | Enter date (month, day, year) and time prepared (24-hour clock). |
| 12. | Reviewed by (OSC) | Enter the name of the operations person reviewing the form, normally the Operations Section Chief. |
| | Date/Time | Enter date (month, day, year) and time prepared (24-hour clock). |